

L15000186634

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

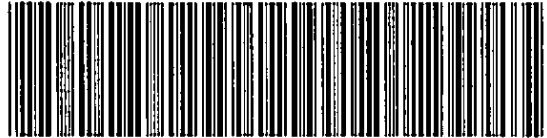
(Business Entity Name)

(Document Number)

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2020 JUL 30 AM 11:17

CLERK OF STATE
MASSACHUSETTS

017 2 5 010

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lammi Consulting LLC
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Felicia Lammi
(Name of Person)

Lammi Consulting LLC
(Firm/Company)

17260 Holmes Mill Ave
(Address)

JAX FL 32226
(City/State and Zip Code)

For further information concerning this matter, please call:

Felicia Lammi at 904 699-8960
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Lammi Consulting LLC

2. The Articles of Organization were filed on Nov. 3, 2015 and assigned

document number L15000186634

3. The delayed effective date the dissolution if not effective on the date of filing: July 31, 2020
(effective date cannot be prior to or more than 90 days later than date document is received for filing)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 605.0707, Florida Statutes, (copy 605.0707 on back cover letter).

Company no longer receiving income
or being used.

5. If there are no members, enter the name and address of the person appointed to wind up the company's activities and affairs:

Felicia Lammi
17260 Holmes Mill Ave
JAX FL 32226

6. Signature of an authorized person or if there are no members, the signature of the person appointed and listed above to wind up the company's activities and affairs:

Felicia Lammi
Signature

Felicia Lammi
Printed Name

FILING FEE: \$25.00

FILED
2020 JUL 30 AM 11:37
SECTION OF STATE
TAX AND SEC. F.